

LIS000112677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

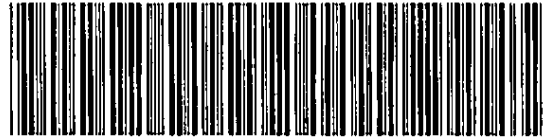
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 AUG 16 2017
FALLAHASSEE, FLORIDA

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AUG 16 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HOME IMPROVEMENT DIRECT LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JB ROTH

Name of Person

ROTH LAW FIRM PL

Firm/Company

6100 GREENLAND RD., SUITE 604

Address

JACKSONVILLE, FL 32258

City/State and Zip Code

JB@ROTHLAWFIRM.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JB ROTH at (904) 595-7900

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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17 JUL 16 PM 0:10
CLERK OF SUPERIOR COURT
JACKSONVILLE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: HOME IMPROVEMENT DIRECT LLC
2. (a) 11497 COLUMBIA PARK DR. W,
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
UNIT 2
JACKSONVILLE, FL 32258
- (b) 11497 COLUMBIA PARK DR. W,
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
UNIT 2
JACKSONVILLE, FL 32258
3. 06/29/2015
Date of filing/registration in Florida
4. L15000112677
Document number
5. (a) ROTH LAW FIRM PL
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
234 CANAL BLVD
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
SUITE 2
PONTE VEDRA BEACH, FL 32082
- (b) ROTH LAW FIRM PL
Enter name of NEW Registered Agent and/or NEW Registered Office address:
6100 GREENLAND ROAD
NEW Registered Office Address:
SUITE 604
JACKSONVILLE, FL 32258

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

JEAN B ROTH, AUTH. REPRESENTATIVE

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent